



STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures for CANDIDATES

(RSA 664)

September 12, 2006 - Primary Election

I, ANITA FREEDMAN of 195 HILLSIDE AVENUE
(print name) PORTSMOUTH NH 03801 TREASURER
(town/city zip code) candidate for the office of DEMOCRATIC COMMITTEE

County of ROCKINGHAM District No. - for the DEMOCRATIC party,

report that I have expenditures exceeding \$500 for the primary election and do submit, with my fiscal agent the following report of receipts and expenditures.

SUMMARY OF RECEIPTS AND EXPENDITURES FOR PRIMARY ELECTION

Date of Report:

August 23 ☐

September 6 ☒

September 20 ☐

Receipts:

- | | |
|--|-----------------------|
| 1) Total of all receipts in this report | 1) \$ <u>40.00</u> |
| 2) Total of all receipts in previous reports | 2) \$ <u>19156.82</u> |
| 3) Total of all primary election receipts to date
(Add lines 1 and 2) | 3) \$ <u>19196.82</u> |

Expenditures:

- | | |
|---|------------------------------------|
| 4) Total expenditures in this report | 4) \$ <u>500.00</u> |
| 5) Total of expenditures in previous reports | 5) \$ <u>14989.58</u> |
| 6) Total of all primary election expenditures to date | 6) \$ <u>15489.58</u> |
| 7) Balance if SURPLUS | 7) \$+ <u>3707.24</u> |
| 8) Balance if DEFICIT | 8) \$- <u> </u> |

RECEIVED
SEP 06 2006
NEW HAMPSHIRE
SECRETARY OF STATE

Alexander Patten
Signature of Candidate CHAIR

Anita Freedman
Signature of Fiscal Agent

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301
Phone: 603-271-3242 - Fax: 603-271-6316 - <http://www.sos.nh.gov>
email: elections@sos.state.nh.us

rockdems

PRIMARY ELECTION ITEMIZED RECEIPTS

Reporting Period ending 9/6/06 2006

Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date	If contribution or aggregate contribution is over \$100 list: Occupation and Place of Business
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Total of receipts unitemized (\$25 or under) in this report \$ 40

PRIMARY ELECTION ITEMIZED EXPENDITURES

Paid to Whom	Post Office Address	Amount of Expense	Date of Expense	***Primary/General	Nature of Expenditure
DAYID MIRSKY	50 BROOKSIDE DRIVE EXETER, NH 03893	\$ 200	8/28/06	<input checked="" type="checkbox"/> <input type="checkbox"/>	DONATION
BETH ROTH	103 CORINTHIAN DRIVE SALEM NH 03079	\$ 300	8/29/06	<input checked="" type="checkbox"/> <input type="checkbox"/>	DONATION
				<input type="checkbox"/> <input type="checkbox"/>	DONATION
				<input type="checkbox"/> <input type="checkbox"/>	
				<input type="checkbox"/> <input type="checkbox"/>	
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				<input type="checkbox"/> <input type="checkbox"/>	
				<input type="checkbox"/> <input type="checkbox"/>	

*List occupation and place of business if total exceeds \$100 for primary or general election. RSA 664:6